

RFP Overview



Investing in Children RFP

Introduction

- All interested & Qualified Agencies
- 6.25 Million for each year, each Focus Area Health, Education and Family
- Contract Period: July 1, 2012 through June 30, 2015 (we may negotiate for 1, 2 or 3 year contracts within this period, based on the specific project, need for service, coordination of existing services, changes in demographics, etc.)
- Number of awards will be determined by the quality of the proposals and the criteria above
- (no minimum/ maximum)



Minimum Proposer Requirements

Proposers must:

- Have agency representatives (such as management, program and fiscal staff) at the mandatory proposal conference
- Have no record of unsatisfactory or seriously deficient performance in current or recent contract performance
- Have a minimum of 3 year-history of demonstrated capacity providing like-services as proposed
- Have the ability to maintain adequate files and records and meet statistical reporting requirements
- Have the administrative and fiscal capacity to provide and manage the proposed services under a reimbursement contract
- Meet other presentation and participation requirements listed in this RFP.

Timeline

ACTIVITY	DATE
• RFP Release	Thursday, November 3, 2011
• Deadline for Question Submissions	Tuesday, November 15, 2011 No later than 12 Noon, PST
• Mandatory Proposal Conference	Wednesday, November 16, 2011
• Deadline for Proposal Submission	Friday, December 16, 2011 No later than 4:00 P.M., PST
• Tentative date for Unsuccessful Proposals Letters – Administrative Phase (No Appeal)	January 13, 2012
• Tentative date for Award/Unsuccessful Proposal Letters – Fiscal and/or Program Phase (Opportunity to Appeal)	April 2, 2012
• Tentative Deadline for Appeals	April 12, 2012
• Tentative date for awarding of Contract(s)	June 6, 2012
• Tentative Start Date for Contract(s)	July 1, 2012

What's Changed?

✎ Amount of Funding Available

✎ Long Range Financial Plan approved June 15, 2011

Direct Services – 2011/12 = \$32,000,000

Direct Services – 2012/13 = \$25,000,000

Direct Services – 2013/14 = \$25,000,000

Direct Services – 2014/15 = \$25,000,000

(Direct Services for 2015/16 drops to \$15,000,000)

- IIC RFP -\$19,150,000 for Fiscal Year 2012/13
- \$12,850,000 less than FY 2010/2011

Strategic Allocation for Direct Services:

(FY 2012/13 – 2014/15)

35% - Health = \$8,750,000

25% - Education = \$6,250,000

25% - Family = \$6,250,000

15% - RCI = \$3,750,000

What's Changed?



Amount of Funding Available

- \$25M budgeted, (\$5,046,488 already obligated)

Direct Service Funding (not included in the Desired Results/Gap Fill RFPs)

Health (35%)			\$8,750,000
Funded Project	Contract Ends	Funded Amount	
SART (4 Assessment Ctrs)	2012/13	\$2,496,366	-\$2,496,366
Total Remaining for RFP 11-02			\$6,253,634

What's Changed?

Direct Service Funding (not included in the Desired Results/Gap Fill RFPs)

Education (25%)			\$6,250,000
Funded Project	Contract Ends	Funded Amount	
None			
Total Remaining for RFP 11-03			\$6,250,000

Family (25%)			\$6,250,000
Funded Project	Contract Ends	Funded Amount	
None			
Total Remaining for RFP 11-04			\$6,250,000

What's Changed?

Direct Service Funding (not included in the Desired Results/Gap Fill RFPs)

Commission's Responsive Initiatives/Systems (15%)			\$3,750,000
Funded Project	Contract Ends	Funded Amount	
DBH – Perinatal SART	² 2011/12	\$552,078	-\$552,078
Children's Network SART Coordinator	³ 2011/12	\$199,385	-\$199,385
Children's Network Community Engagement Activities	⁴ 2011/12	\$488,008	-\$488,008
CARES Plus Match	⁵ 2012/13	\$899,926	-\$899,926
Social Entrepreneurs	⁶ 2011/12	\$135,725	-\$135,725
United Way	⁷ 2011/12	\$275,000	-\$275,000
Total Remaining for RFP 11-02			\$1,199,878

What's Changed?

Priorities – Highly ranked, new and not currently funded through DR or GF RFPs

- Addressing low birth weights/infant mortality rates
- Prevention of Child Abuse and Neglect
- WIC and Public Assistance Utilization
- Asthma and Bronchitis Intervention
- Childhood Obesity Intervention
- Healthy City/Healthy Community - Investing in established infrastructure with like missions
- Although based on data some areas of need were considered less urgent, many are addressed simply by tackling and funding the priority areas

What's Changed?



Approach

- Strengthening Families™ Protective Factors Framework

Fiscal

- Controlled Incentives/No Gift Cards/Hard Goods
- Controlled Variance for Salaries & Benefits
- Controlled Admin Costs

Program

- Monthly Reports
- Identified Evaluation Tools
- Identified Models of Service and Curriculums
- Immediate and Definable Outcomes
- Identified Targeted Populations
- Emphasis on Successful Care Coordination and Utilization

First 5 San Bernardino (F5SB) Strengthening Families™ Matrix

Strengthening Families Protective Factors	Alignment with F5SB Goals	Alignment with F5SB Strategies	Alignment with F5SB Service Delivery Approach	Alignment with F5SB Interventions/Indicators
Children's Social and Emotional Development	Children and families are healthy and safe	Early Screening and Intervention	Screen, Assessment, Referral, Treatment (SART)	Identify developmental concerns, Support children's social and emotional competence, Support family to advocate for child in school
		Health Care Access	Care Coordination	Provide health information, Provide transportation to access medical/counseling appointments as needed.
		Oral Health	Screening and Treatment	Provide Screening, treatment and referrals
Parental Resilience & Knowledge of Parenting and Child Development	Families are Strong and Connected	Parent Education	Nurturing Parents Parenting Skills	Positive parenting education
		Early Education Programs	Parent Advisory Groups	Effectively involve parents and other relatives to ensure families are connected
Concrete Support in Times of Need	Families are safe, healthy, nurturing and self-sustaining	Resource Center and Case Management	Emergency Basic Needs Case Management	Participate in multi-disciplinary teams to coordinate services
Parental Resilience	Families are free from substance abuse	Early Screening and Intervention	Perinatal Screening, Assessment, Referral, Treatment (P-SART)	Parent support such as group therapy, PCIT and the coordination of services
Social Connections	Communities are engaged and empowered to meet the needs of children	Community Education	Support Systems	Connections through Community Education and Public Campaigns

Adopted from the Family Development Matrix Pathway Project, 2011 Funded by the Office of Child Abuse Prevention

HEALTH



Health Overview

Through this RFP, First 5 San Bernardino (F5SB) seeks to support improved health outcomes for pregnant women and children 0-5 by supporting not only direct treatment services and expansion in capacity, but by also assisting parents/caregivers in navigating and receiving appropriate services from the medical, nutritional, and dental health systems.

Strategic Goal and Outcomes

The First 5 San Bernardino Strategic Plan supports Health goals through five strategic and inter-related initiatives, three of which are included in this RFP: (1) Early Screenings and Intervention, (2) Health Care Access, (3) Oral Health. These strategies support our goal that *“Children and families are healthy and safe”*.

Strategy: Early Screening and Intervention

GOALS	SERVICE DELIVERY APPROACH	OUTCOMES/INDICATORS
Children are born healthy	Perinatal Care Services	-Reduce number/percentage of pregnant women abusing substances
Children are healthy, well-nourished and physically fit	Asthma/Bronchitis Intervention	-Reduce asthma related hospitalization
	Overweight/Obesity Intervention	-Improved nutrition among children and -Improved physical fitness among children

Strategy: Health Care Access

GOALS	SERVICE DELIVERY APPROACH	OUTCOMES/INDICATORS
Children have an on-going relationship with health provider	Health Insurance Screening, Enrollment and Care Coordination	-Increased number/percent of children with health insurance and -Increase number/percent of children with an established medical home
	Healthy Kids- Health Insurance Coverage, Enrollment and Care Coordination	-Increase number/percent of children with health insurance who are ineligible to other programs and -Increase number/percent of children with an established medical home

Strategy: Oral Health

GOALS	SERVICE DELIVERY APPROACH	OUTCOMES/INDICATORS
Children are healthy, well- nourished and physically fit	Screening, Treatment and Care Coordination	-Increased number/percent of children receiving annual dental screenings and appropriate follow-up care
Communities are engaged to meet the needs of children	Pediatric Dentist Recruitment and Retention	-Increased number of pediatric dentist providers to increase the number of children receiving annual dental screenings and follow-up care

Strategy: Systems Integration (Additional Health Funding Opportunity)

GOALS	SERVICE DELIVERY APPROACH	OUTCOMES/INDICATORS
Communities are engaged to meet the needs of children	Healthy Cities/Healthy Communities Collaboration	Provide various opportunities- assessments, mentoring, coaching, training, workshops, etc.- to build capacity and achieve sustainable long term outcomes



**See Exhibit A- Health Services
Investing in Children RFP**

EDUCATION



Education Overview

Through this RFP, First 5 San Bernardino (F5SB) seeks to support high quality and developmentally appropriate early education programs for children in San Bernardino County. Research shows that high quality early education programs can improve a child's cognitive, social and emotional development so that they are better prepared for success in school and in life.

Strategic Goals and Outcomes


The First 5 San Bernardino strategic plan supports Education activities through three strategic and inter-related initiatives, two of which are included in this RFP: (1) Early Education Programs, (2) Access to Quality Child Care. These initiatives support our goal that *"children enter school ready to learn"*.

Strategy: Early Education Programs

GOALS	SERVICE DELIVERY APPROACH	INDICATORS
Children live in a home environment supportive of learning	Home Visitation	-Increased number/percentage of parents using developmentally appropriate school readiness activities with their children <u>and</u> -Increased family literacy skills
Children develop within normal ranges in all domains	Pre-K Academy	-Increased number/percentage of children exhibiting age-appropriate development <u>and</u> -Increased number/percentage of children exhibiting healthy cognitive and social-emotional behavior
	Preschool	-Increased number/percentage of children exhibiting age-appropriate development <u>and</u> -Increased number/percentage of children exhibiting healthy cognitive and social-emotional behavior

Strategy: Access to Quality Child Care

GOALS	SERVICE DELIVERY APPROACH	INDICATORS
Children have access to high quality early childhood development programs	School-Based Infant/Toddler Care	-Increased number/percentage of parents informed of and number/percent of children enrolled in high quality subsidized child care <u>and</u> -Increased number/percentage



**See Exhibit A- Education Services
Investing In Children RFP**



FAMILY



Family Overview

Through this RFP, First 5 San Bernardino (F5SB) seeks to support improved parenting and family self-sufficiency outcomes for parents/caregivers of children 0-5. F5SB is committed to supporting direct services to families seeking the skills necessary to develop and maintain long term self-sufficiency as well as strengthening the relationship between parent/caregiver and child to support long term safety and healthy developmental outcomes for children in San Bernardino County.

Strategic Goals and Outcomes

The F5SB Strategic Plan supports family goals through two strategic and inter-related initiatives, which are included in this RFP: (1) Parent Education and (2) Resource Center and Case Management. These strategies support our goal that *“Families are safe, healthy, nurturing and self-sustaining”*.

Strategy: Parent Education

GOALS	SERVICE DELIVERY APPROACH	OUTCOMES/INDICATORS
Children are free from any form of abuse	Nurturing Parents	<ul style="list-style-type: none">- Increased number/percentage of parents understanding developmental milestones and practicing parenting skills that are developmentally appropriate for their child and- Increased number/percent of parents practicing positive disciplinary skills

Strategy: Resource Center and Case Management

GOALS	SERVICE DELIVERY APPROACH	OUTCOMES/INDICATORS
Families are stable and have the capacity to meet the needs of their children	Resource Center and Case Management	<ul style="list-style-type: none">- Improved parental ability to access and coordinate needed services for their children and- Improved parental ability to meet the basic needs of their families
Parents are mentally and physically fit	Case Management	<ul style="list-style-type: none">- Increased coping skills among parents to improve parenting behavior (attitudinal domains such as anger management, stress relief)



**See Exhibit A- Family Services
Investing in Children RFP**

Proposal Review and Selection Process

